

Colorado Cancer Coalition Priorities: 2016-2018

Option 5 of 10: Screening & Early Detection: Oral Cancer

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Goal 5: Increased high-quality cancer screening and early detection rates.

Objective 5.3: Increase early detection rates of non-screenable cancers.

Focus Area: Oral cancer.

→ Strategies

- Increase awareness of the symptoms of non- screenable cancers among health care providers and individuals.
- Educate medical and health care students via structured programs about symptoms, risk factors, early detection, genetic counseling and genetic testing for non-screenable cancer types.
- Educate dental health professionals on how to assess an individual for signs of oral cancer.
- Support research studies, including randomized control trials, to investigate new and innovative cancer screening tests.

→ Measures

	Data Source	Baseline	2020 Target
In situ or localized stage oral cancer	2012 CCCR	35.7%	40%

→ What we know about the problem

- Cancers of the head and neck are mostly caused by tobacco and alcohol, but recent studies show that **about 70 percent of cancers of the [oropharynx](#) may be linked to HPV**. Many of these may be caused by a combination of tobacco, alcohol, and HPV.
- HPV-related oropharyngeal cancers are more likely in men than women, and are [projected to surpass the number of cervical cancers](#) as the #1 type of cancer caused by HPV by 2020.
- The lifetime risk of being diagnosed with oropharyngeal cancer is approximately one in 56 for males, and one in 136 for females.
- Oropharyngeal cancers are often diagnosed in later stages, leading to lower average five year survival rate than many other cancers ([38 percent](#) with a range of 11 to 67 percent). Fortunately, cancers linked to HPV with no other risk factors tend to have a better prognosis.
- While the U.S. Preventive Services Task Force did not find sufficient evidence to recommend oral cancer screening by primary care providers for asymptomatic patients, **dental providers routinely screen for head and neck cancers as a standard of practice.**

→ Why should CCC members prioritize this area of work?

Prioritization factors	Considerations	Notes
Likelihood of Population Impact	<ul style="list-style-type: none">• Early detection is key to ensuring oropharyngeal cases have the best chance of successful outcomes.• Oropharyngeal cancer treatments may be extremely invasive and lead to lifelong deformities and other health consequences.	

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Evidence of Feasibility	<ul style="list-style-type: none"> Recognizing symptoms of oropharyngeal cancer should be standard of care for both medical and dental professionals. 	
Established Need	<ul style="list-style-type: none"> As oropharyngeal cancer incidence rates rise, it is more important to ensure regular screenings occur to diagnosis early stage lesions. 	
Measurability	<ul style="list-style-type: none"> The Colorado Central Cancer Registry tracks incidence and staging of cancer cases occurring in the state. Incidence rate data is generally 2 years behind, ie. 2014 incidence rates will be available in 2016. 	
Collective Impact	<ul style="list-style-type: none"> Community and statewide support is needed to increase provider and student awareness of oral cancer strategies. CCC's leadership can ensure engagement by key stakeholders from education, dental and primary care institutions. 	
Identified Gaps	<ul style="list-style-type: none"> Strategies require a multidisciplinary approach, engagement among health science students, primary care providers and dental providers must be addressed. 	
Opportunities for Leveraging partnerships	<ul style="list-style-type: none"> Interprofessional training efforts already exist at the CU medical campus, ensuring both medical and dental professionals understand how to screen for oropharyngeal cancers. Previous collaborations between medical and dental societies can be used to further oropharyngeal screening strategies. 	
Political/ community support	<ul style="list-style-type: none"> A large section of the dental community is engaged in integrating dental and medical health care systems. Dental providers are already committed to providing regular head and neck screenings in order to detect and refer for treatment patients with signs of oropharyngeal cancers. 	

Would you or your organization commit to helping with this priority?